

Supporting Pupils with Medical Conditions Policy

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20.	

Help provide access to regular, updated training for school staff in managing the most common medical conditions at school;

Provide information about where the school can access other specialist training;

Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards with the school;

When necessary, ensure that an ambulance or other professional medical help is called.

7. The role of the

9. The role of other healthcare professionals

Other healthcare professionals, including GPs and pediatricians should:

- Notify the school nursing team when a child has been identified as having a medical condition that will require support at school;
- Provide advice on developing IHPs;
- Provide support in the school for children with particular conditions, e.g. asthma, diabetes and epilepsy;
- Liaise with the individual schools, where necessary, on the writing of Healthcare Plans;
- Where possible, and without compromising the best interests of the child, try to prescribe medication that can be taken outside of school hours;
- Where appropriate, give child written care/self management plan to control their condition;
- Ensure the child knows how to take medication effectively where appropriate;
- Ensure children have regular reviews of their condition and their medication;
- Provide the school with information and advice regarding individual children with medical conditions (with the consent of the pupil and their parents/carers);
- Work with the school to ensure that pupils with medical conditions can attend school full-time if needed

10. The role of the LA

10.1. The LA:

- Promotes co-operation between relevant partners;
- Makes joint commissioning arrangements for education, health and care provision for pupils with SEND;
- Provides support, advice and guidance, and suitable training for school staff, ensuring that IHPs can be effectively delivered;
- Works with the school to ensure that pupils with medical conditions can attend school full-time.

10.2. Where a pupil is away from school for 15 days or more (whether consecutively or across a school year), the LA has a duty to make alternative arrangements, as the pupil is unlikely to receive a suitable education in a school.

11. The role of OfSTED

- 11.1. OfSTED inspectors will consider how well the school meets the needs of the full range of pupils, including those with medical conditions.
- 11.2. Key judgements are informed by the progress and achievement of pupils with medical conditions, alongside pupils with SEND, and also by the school's spiritual, moral, social and cultural development.

12. Admissions

- 12.1. No child is denied admission to any of the Trust schools or prevented from taking up a school place because arrangements for their medical condition have not been made.

12.2. A child may only be refused admission if it would be detrimental to the health of the

understood and that staff can recognise difficulties and act quickly in emergency situations.

14.9. Training is commissioned by the Headteacher and may be provided by the following bodies:

Commercial training provider

Parents/carers of pupils with medical conditions

Children and Young Peoples Nurses/Specialist Nurse Trainers for Children with Disabilities

14.10. Parents/carers of pupils with medical conditions are consulted for specific

The Trust has clear guidance on the administration of medication at school. Each school will have their own policy but this will follow the Trust policy guidelines with their individual specifications of locations of storage cabinets, etc.

18.1 Administration – emergency medication:

Medication for all pupils with medical conditions is kept in a locked cabinet;

The lead member of staff in each school keeps medication for out of school and residential activities in a specified bag with written instructions

All pupils who have emergency medication know the procedures for retrieving it.

19.2 Safe storage – general

There is an identified member of staff who ensures the correct storage of medication;

All medication is stored in locked cabinets;

All parents/carers are responsible for supplying medication in a timely manner in accordance with the frequency;

Medication is stored where possible in its original container with expiry date and instructions for administering;

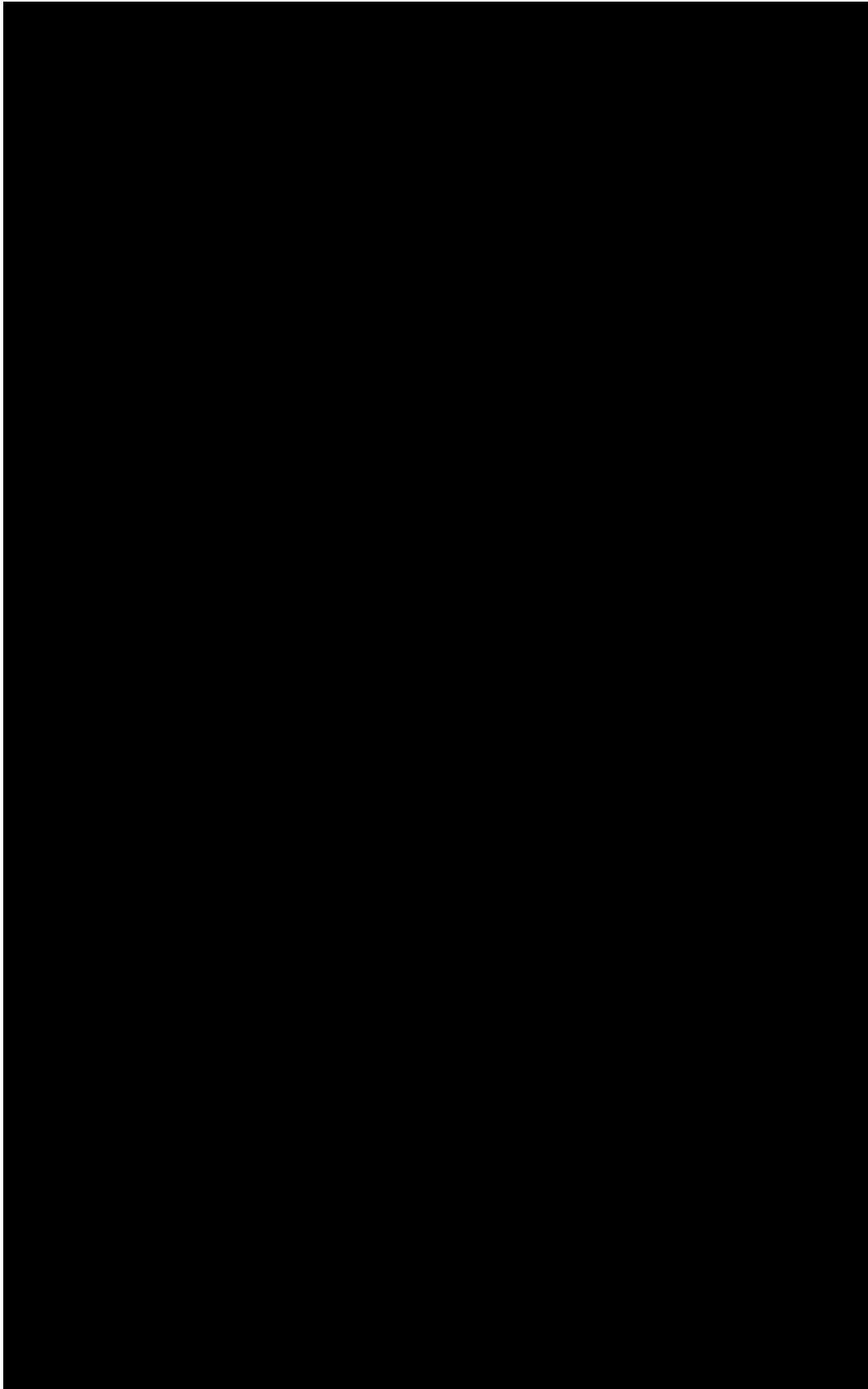
21.3 If the issue remains unresolved, the complainant has the right to make a formal complaint to the DfE.

21.4 Parents/carers and pupils are free to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

22 Home-to-school transport

22.1 Arranging home-to-school transport for pupils with medical conditions is the responsibility of the

Appendix 1 - Individual healthcare plan implementation procedure



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Individual healthcare plan (page 3 of 3)

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken . who, what, when

Appendix 3 - Model letter inviting parents to contribute to individual healthcare plan development (this will usually be done by inviting the Parents/Carers to meet at school but the letter may be used should the Parents/Carers fail to respond)

SCHOOL NAME AND ADDRESS

Dear Parent,

RE: DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support each pupil needs and how this will be provided.

Individual healthcare plans are developed in partnership with the school, parents/carers, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for *xx/xx/xx (insert date)*. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will include *(add details of team)*. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible. If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. You will need to come in to school to complete a

letter of authorisation. I or (*add name of other staff lead*) would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely,

**Headteacher name
School name**